



Applicant or Patentee: John T. Isaacs, et al. Serial or Patent No.: Filed or Issued:

For:

PROSTATE-SPECIFIC PRODRUG

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) and 1.27(d)) - NONPROFIT ORGANIZATION

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

. Hereby di		The table to the live the live of the first			
Address of	ganization: Organization: ganization:	The Johns Hopkins University School of Medicine 720 Rutland Avenue, Baltimore, Maryland 21205			
	[] []	UNIVERSITY OR OTHER INSTITUTION OF HIGHER EDUCATION TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 USC 501(a) and 501(c)(3)) NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA (NAME OF STATE:)			
	[]	(CITATION OF STATUTE:) WOULD QUALIFY AS TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 USC 501(a) and 501(c)(3)) IF			
	[]	LOCATED IN THE UNITED STATES OF AMERICA WOULD QUALIFY AS NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA IF LOCATED IN THE UNITED STATES OF AMERICA (NAME OF STATE:) (CITATION OF STATUTE:)			
1.9(e) for	purposes of entitled PROST	e nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 CFR paying reduced fees under section 41(a) and (b) of Title 35, United States Code with regard to the ATE-SPECIFIC PRODRUG by inventor(s) JOHN T. ISAACS, SAMUEL R. DENMEADE, S. BROGGER CHRISTENSEN, HANS			
	[X]	the specification filed herewith.			
	[]	application serial no, filed patent no. , issued .			
	clare that righ ve identified	nts under contract or law have been conveyed to and remain with the nonprofit organization with regard invention.			
the inventi qualify as	ion is listed a small busin R 1.9(d) or a	e nonprofit organization are not exclusive, each individual, concern or organization having rights to below* and no rights to the invention are held by any person, other than the inventor, who could not ess concern under 37 CFR 1.9(c) or by any concern which would not qualify as a small business concern nonprofit organization under 37 CFR 1.9(e). Separate verified statements are required from each named person, concern or organization having rights			
		invention averring to their status as small entities. (37 CFR 1.27)			
Eull Name:	-				
Address:					
rrik era	[]INDI\	/IDUAL [] SMALL BUSINESS CONCERN [] NONPROFIT ORGANIZATION			
<u> ēntitlement</u>	to small enti	to file, in this application or patent, notification of any change in status resulting in loss of ty status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance n which status as a small entity is no longer appropriate. (37 CFR 1.28(b))			
belief are the like so that such w	believed to be made are punis illful false st	l statements made herein of my own knowledge are true and that all statements made on information and true; and further that these statements were made with the knowledge that willful false statements and shable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and satements may jeopardize the validity of the application, any patent issuing thereon, or any patent to ement is directed.			
Name:					
Title:					
Address:	720 Rutland Avenue, Baltimore, Maryland 21205				
Signature:	Date:				
58811.LJ1					



COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I an	the original, first and so	ole inventor (if only one name is listed below) or an original, first
and joint inventor (if	olural names are listed be	elow) of the subject matter which is claimed and for which a
patent is sought on the	invention entitled TISS	UE SPECIFIC PRODRUG, the specification of which
is attached		•
☐ was filed	on	as Application Serial No.
	nded on	
· was descri	bed and claimed in PCT	International Application No.
	and as	
	19 on	
I acknowledg	as amended by any amen e the duty to disclose all f Federal Regulations, §1	information I know to be material to patentability in accordance
I hereby clair provisional application		35, United States Code, §119(e)(1) of any United States
U.S. SERIAL NO.	FILING DATE	STATUS
		■ Pending □ Issued □ Abandoned
60/090 046		■ Danding □ Iggued □ Abandanad

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: John R. Wetherell, Jr., Ph.D. Reg. No. 31,678; Joseph R. Baker, Reg. No. 40,900; J. Peter Fasse, Reg. No. 32,983; Janis K. Fraser, Reg. No. 34,819; Eldora L. Ellison, Reg. No. 39, 967; John W. Freeman, Reg. No. 29,066; George Heibel, Reg. No. P42,648; Lisa A. Haile, Reg. No. 38,347; Scott Harris, Reg. No. 32,030; John F. Hayden, Reg. No. 37,640; John Land, Reg. No. 29,554; Anita L. Meiklejohn, Reg. No. 35,283; John T. Prince, Reg. No. P-43,019; Y. Rocky Tsao, Reg. No. 34,054; and Hans R. Troesch, Reg. No. 36,950.

Address all telephone calls to John R. Wetherell, Jr. at telephone number 619/678-5070.

Address all correspondence to <u>John R. Wetherell, Jr.</u>, Fish & Richardson P.C., 4225 Executive Square, Suite 1400, La Jolla, CA 92037.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Full Name of Inventor: John T. Isaacs					
Inventor's Signature:	Date:				
Residence Address: Baltimore, MD					
Citizen of: U.S.A.					
Post Office Address: Johns Hopkins Oncology Center, Johns Hopkins School of Medicine, 422 N. Bond Street,					
Baltimore, MD 21231-1001					
Full Name of Inventor: Samuel R. Denmeade					
Inventor's Signature:	Date:				
Residence Address: Baltimore, MD					
Citizen of: U.S.A.					
Post Office Address: Johns Hopkins Oncology Center, Johns Hopkins School of Medicine, 422 N. Bond Street,					
Baltimore, MD 21231-1001					
Full Name of Inventor: S. Brogger Christensen					
Inventor's Signature:	Date:				
Residence Address: Copenhage	n, Denmark				
Citizen of: Denmark					
Post Office Address: Copenhagen, Denmark					
Full Name of Inventor: Hans Lilja					
Inventor's Signature:	Date:				
Residence Address: Malmo,	Sweden				
Citizen of: Sweden					
Post Office Address: Malmo, Sweden					